



**REQUEST FOR
APPROVAL
OF
FEDERAL FUNDS**

FISCAL YEAR 2022-2023

**Prepared for
Appropriations Committee Hearings
2022**

**Commonwealth of Pennsylvania
Tom Wolf
Governor**

**Robert Torres
Secretary of Aging**

Table of Contents

Page

GENERAL FUND:

General Government:

Fund

70007	Programs for the Aging -Title III - Administration	1
70008	Programs for the Aging - Title V - Administration	2
70009	Medical Assistance - Administration	3
71048	Program for the Aging - Title VII - Administration	4

Grants and Subsidies:

71049	Programs for the Aging - Title III	5
71050	Programs for the Aging - Nutrition	6
71051	Programs for the Aging - Title V - Employment	7
71052	Programs for the Aging - Title VII - Elder Rights Protection	8
70425	Medical Assistance Support	9
71053	Medical Assistance Nursing Home Transition Administration	10
70006	Pre-Admission Assessment	11
70011	Programs for the Aging - Title III - Caregiver Support	12
71120	Chronic Disease Self-Management Education	13
80594	Program for the Aging - Overdose Data to Action Grant	14
80597	Disease Prevention Program	15
80910	State Opioid Response Grant II	16

**COMMONWEALTH OF PENNSYLVANIA
REQUEST FOR APPROVAL OF FEDERAL FUNDS**

	Authorization Number 2022-01	Date Prepared 03-Feb-22
1. Federal Appropriation & Symbol Programs for the Aging - Title III - Administration 7000700000	2. State Agency Department of Aging	3. Action Requested <input checked="" type="checkbox"/> Legislative Appropriation
4. Supplemented Appropriation (Title/Symbol) General Government Operations 1070100000	8. Federal CFDA No. 93.045	<input type="checkbox"/> Executive Authorization
5. Contact Person (Telephone No.) Kim Adams (717-783-0732)	9. Purpose <input type="checkbox"/> Original Request <input type="checkbox"/> Subgrant	
6. Restricted Receipt/Revenue Title/Symbol N/A	<input type="checkbox"/> Amendment to Appropriation <input type="checkbox"/> Carryover <input type="checkbox"/> Language	
7. Federal Grant Program Title Special Programs for the Aging	<input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Amend Governor's <input type="checkbox"/> Other: Budget	
10. Federal Granting Agency/Division DHHS/Administration for Community Living	12. Federal Grant Authorization OAA of 2006 (as amended); P.L. 109-365	

11. TYPE OF PROGRAM
 On-going One time From: To:

13. Funding (Dollar Amounts in Thousands)

	Actual 2020-21		Available 2021-22		Request 2022-23	
Carryover	\$0		\$0		\$0	
New Funding Available	\$0		\$0		\$0	
Federal Appropriation	\$1,781	75.00%	\$1,781	75.00%	\$1,781	75.00%
Estimated Expenditures	XXXXXXXX		XXXXXXXX		XXXXXXXX	
Ending Balance	\$1,781		\$1,781		\$1,781	
Required Matching						
State	\$594	25.00%	\$594	25.00%	\$594	25.00%
Other	\$0	0.00%	\$0	0.00%	\$0	0.00%
Program Total	\$2,375	100.00%	\$2,375	100.00%	\$2,375	100.00%
100% Federal Complement	0		0		0	

MATCH EXPLANATION:

14. Is the amount requested an increase or decrease from the amount in previous years? Yes No X If yes, explain below.

15. Are these funds discretionary? Yes No X If yes, explain below.

16. Are these administrative funds for a restricted receipt? Yes No X If so, what is the amount of the restricted receipt?

17. What is the Federal lapse date? 9/30/2024

18. Grant description and results (give purpose of grant and describe key program activities and expected results in terms of a major program measure).

Funds are provided to maintain administrative and support services for the operation of a statewide program for older persons. This program includes the provision of social services, multi-purpose senior centers and low-cost nutritious meals served in a congregate setting or delivered to the home. These funds are used for the administration of the Aging Program in Pennsylvania. Activities include statewide planning, technical assistance, monitoring, policy making and grants and contract administration. The expected result is a well managed program for older persons in Pennsylvania and one that is in compliance with state and federal regulations.

19. For Subgrants only, identify the parent Federal appropriation and the agency from which the subgrant will be made:

	Commonwealth	SAP Fund	Business
<u>Appropriation Title</u>	<u>Fund (Fund Type)</u>	<u>Number</u>	<u>Area</u>

**COMMONWEALTH OF PENNSYLVANIA
REQUEST FOR APPROVAL OF FEDERAL FUNDS**

	Authorization Number 2022-01	Date Prepared 14-Jan-22
1. Federal Appropriation & Symbol Programs for the Aging - Title VII - Elder Rights Protection 7105200000	2. State Agency Department of Aging	3. Action Requested <input checked="" type="checkbox"/> Legislative Appropriation
4. Supplemented Appropriation (Title/Symbol) PENNCARE 1000800000	8. Federal CFDA No. 93.041; 93.042; 93.779	<input type="checkbox"/> Executive Authorization
5. Contact Person (Telephone No.) Kimberly Adams (717-783-0732)	9. Purpose <input type="checkbox"/> Original Request <input type="checkbox"/> Subgrant	
6. Restricted Receipt/Revenue Title/Symbol N/A	<input type="checkbox"/> Amendment to Appropriation <input type="checkbox"/> Carryover <input type="checkbox"/> Language	
7. Federal Grant Program Title Special Programs for the Aging Title VII, Chapters 2 & 3	<input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Amend Governor's <input type="checkbox"/> Other: Budget	
10. Federal Granting Agency/Division DHHS/Centers for Medicare & Medicaid Services	12. Federal Grant Authorization Sec 4360 OBRA of 1990	

11. TYPE OF PROGRAM
 On-going One time From: To:

13. Funding (Dollar Amounts in Thousands)	Actual 2020-21		Available 2021-22		Request 2022-23	
Carryover	\$0		\$0		\$0	
New Funding Available	\$0		\$0		\$0	
Federal Appropriation	\$7,800	100.00%	\$7,800	100.00%	\$7,800	100.00%
Estimated Expenditures	XXXXXXXX		XXXXXXXX		XXXXXXXX	
Ending Balance	\$7,800		\$7,800		\$7,800	
Required Matching						
State	\$0	0.00%	\$0	0.00%	\$0	0.00%
Other	\$0	0.00%	\$0	0.00%	\$0	0.00%
Program Total	\$7,800	100.00%	\$7,800	100.00%	\$7,800	100.00%
100% Federal Complement	0		0		0	

MATCH EXPLANATION:

14. Is the amount requested an increase or decrease from the amount in previous years? Yes No X If yes, explain below.
15. Are these funds discretionary? Yes No X If yes, explain below.
16. Are these administrative funds for a restricted receipt? Yes No X If so, what is the amount of the restricted receipt?
17. What is the Federal lapse date? 9/30/2024
18. Grant description and results (give purpose of grant and describe key program activities and expected results in terms of a major program measure).
 Funds are provided to operate statewide programs through the Area Agencies on Aging for older persons. Services include ombudsman, elder abuse prevention and pension counseling.
19. For Subgrants only, identify the parent Federal appropriation and the agency from which the subgrant will be made:
- | | | | |
|----------------------------|-------------------------|-----------------|-----------------|
| <u>Appropriation Title</u> | <u>Commonwealth</u> | <u>SAP Fund</u> | <u>Business</u> |
| | <u>Fund (Fund Type)</u> | <u>Number</u> | <u>Area</u> |

**COMMONWEALTH OF PENNSYLVANIA
REQUEST FOR APPROVAL OF FEDERAL FUNDS**

	Authorization Number 2022-01	Date Prepared 14-Jan-22
1. Federal Appropriation & Symbol Medical Assistance Nursing Home Transition Administration 7105300000	2. State Agency Department of Aging	3. Action Requested <input checked="" type="checkbox"/> Legislative Appropriation
4. Supplemented Appropriation (Title/Symbol) PENNCARE 1000800000	8. Federal CFDA No. 93.778	<input type="checkbox"/> Executive Authorization
5. Contact Person (Telephone No.) Kimberly Adams (717-783-0732)	9. Purpose <input type="checkbox"/> Original Request <input type="checkbox"/> Subgrant	
6. Restricted Receipt/Revenue Title/Symbol N/A	<input type="checkbox"/> Amendment to Appropriation <input type="checkbox"/> Carryover <input type="checkbox"/> Language	
7. Federal Grant Program Title Medical Assistance Program	<input checked="" type="checkbox"/> Renewal <input type="checkbox"/> Amend Governor's Budget <input type="checkbox"/> Other: Supplemental	
10. Federal Granting Agency/Division DHHS/Centers for Medicare and Medicaid Services	12. Federal Grant Authorization	

11. TYPE OF PROGRAM
 On-going One time From: To:

13. Funding (Dollar Amounts in Thousands)	Actual 2020-21		Available 2021-22		Request 2022-23	
Carryover	\$0		\$0		\$0	
New Funding Available	\$0		\$0		\$0	
Federal Appropriation	\$700	100.00%	\$700	100.00%	\$700	100.00%
Estimated Expenditures	XXXXXXXX		XXXXXXXX		XXXXXXXX	
Ending Balance	\$700		\$700		\$700	
Required Matching						
State	\$0	0.00%	\$0	0.00%	\$0	0.00%
Other	\$0	0.00%	\$0	0.00%	\$0	0.00%
Program Total	\$700	100.00%	\$700	100.00%	\$700	100.00%
100% Federal Complement	0		0		0	

MATCH EXPLANATION:

14. Is the amount requested an increase or decrease from the amount in previous years? Yes No X If yes, explain below.

15. Are these funds discretionary? Yes No X If yes, explain below.

16. Are these administrative funds for a restricted receipt? Yes No X If so, what is the amount of the restricted receipt?

17. What is the Federal lapse date? 9/30/2024

18. Grant description and results (give purpose of grant and describe key program activities and expected results in terms of a major program measure).

To provide Federal funding for Nursing Home Transition activities.

19. For Subgrants only, identify the parent Federal appropriation and the agency from which the subgrant will be made:

	Commonwealth	SAP Fund	Business
<u>Appropriation Title</u>	<u>Fund (Fund Type)</u>	<u>Number</u>	<u>Area</u>

**COMMONWEALTH OF PENNSYLVANIA
REQUEST FOR APPROVAL OF FEDERAL FUNDS**

	Authorization Number 2022-01	Date Prepared 14-Jan-22
1. Federal Appropriation & Symbol Program for the Aging - Overdose Data to Action Grant 8059400000	2. State Agency Department of Aging	3. Action Requested <input type="checkbox"/> Legislative Appropriation
4. Supplemented Appropriation (Title/Symbol) PACE Contracted Services (EA) 2023300000	8. Federal CFDA No. 93.136	<input checked="" type="checkbox"/> Executive Authorization
5. Contact Person (Telephone No.) Kimberly Adams (717-783-0732)	9. Purpose <input checked="" type="checkbox"/> Original Request <input type="checkbox"/> Subgrant	
6. Restricted Receipt/Revenue Title/Symbol N/A	<input type="checkbox"/> Amendment to Appropriation <input type="checkbox"/> Carryover <input type="checkbox"/> Language	
7. Federal Grant Program Title Overdose Data to Action	<input type="checkbox"/> Renewal <input type="checkbox"/> Amend Governor's <input type="checkbox"/> Other: Budget	
10. Federal Granting Agency/Division Department of Health	12. Federal Grant Authorization 42 U.S.C. 241	
11. TYPE OF PROGRAM <input type="checkbox"/> On-going <input checked="" type="checkbox"/> One time From: 1/1/2020 To: 8/31/2022		

13. Funding (Dollar Amounts in Thousands)

	2020-21		2021-22		2022-23	
Carryover	\$0		\$0		\$0	
New Funding Available	\$0		\$0		\$0	
Federal Appropriation	\$700	100.00%	\$700	100.00%	\$700	100.00%
Estimated Expenditures	XXXXXXXX		XXXXXXXX		XXXXXXXX	
Ending Balance	\$700		\$700		\$700	
Required Matching						
State	\$0	0.00%	\$0	0.00%	\$0	0.00%
Other	\$0	0.00%	\$0	0.00%	\$0	0.00%
Program Total	\$700	100.00%	\$700	100.00%	\$700	100.00%
100% Federal Complement	0		0		0	

MATCH EXPLANATION:

14. Is the amount requested an increase or decrease from the amount in previous years? Yes No X If yes, explain below.
15. Are these funds discretionary? Yes No X If yes, explain below.
16. Are these administrative funds for a restricted receipt? Yes No X If so, what is the amount of the restricted receipt?
17. What is the Federal lapse date? N/A
18. Grant description and results (give purpose of grant and describe key program activities and expected results in terms of a major program measure).
This is an Interagency Grant between PA Department of Health and PA Department of Aging. This Subgrant will serve to transfer federal funds received under the CDC Overdose Data to be utilized to expand statewide academic detailing for prescribers utilizing PDMP approved educational materials & targeting aberrant prescribers determined by analysis of PDMP system data, & to increase academic detailing sessions in all counties except Philadelphia & Allegheny.
19. For Subgrants only, identify the parent Federal appropriation and the agency from which the subgrant will be made:

<u>Appropriation Title</u>	<u>Commonwealth Fund (Fund Type)</u>	<u>SAP Fund Number</u>	<u>Business Area</u>
<u>Health</u>	<u>001</u>	<u>7103700000</u>	<u>67</u>

**COMMONWEALTH OF PENNSYLVANIA
REQUEST FOR APPROVAL OF FEDERAL FUNDS**

	Authorization Number 22-01	Date Prepared 14-Jan-22
1. Federal Appropriation & Symbol State Opioid Response (SOR) II Grant 8091000000	2. State Agency Department of Aging	3. Action Requested [] Legislative Appropriation
4. Supplemented Appropriation (Title/Symbol) PA Department of Drug and Alcohol Programs	8. Federal CFDA No. 93.788	[X] Executive Authorization
5. Contact Person (Telephone No.) Kimberly Adams (717-783-0732)	9. Purpose [] Original Request [x] Subgrant	
6. Restricted Receipt/Revenue Title/Symbol N/A	[] Amendment to Appropriation [] Carryover [] Language	
7. Federal Grant Program Title Title II Division H of the Consolidated Appropriations Act	[X] Renewal [] Amend Governor's Budget [] Other:	
10. Federal Granting Agency/Division DHHS/Administration on Aging	12. Federal Grant Authorization 1H79TI083297-01	

11. TYPE OF PROGRAM

[] On-going [x] One time From: 9/30/2021 To: 6/30/2022

13. Funding (Dollar Amounts in Thousands)

	Actual 2020-2021		Available 2021-2022		Request 2022-2023	
Carryover	\$0		\$0		\$0	
New Funding Available	\$0		\$0		\$0	
Federal Appropriation	\$0	0.00%	\$57	100.00%	\$19	100.00%
Estimated Expenditures	XXXXXXXX		XXXXXXXX		XXXXXXXX	
Ending Balance	\$0		\$57		\$19	
Required Matching						
State	\$0	0.00%	\$0	0.00%	\$0	0.00%
Other	\$0	0.00%	\$0	0.00%	\$0	0.00%
Program Total	\$0	0.00%	\$57	100.00%	\$19	100.00%
100% Federal Complement	\$0		\$0		\$0	

MATCH EXPLANATION:

14. Is the amount requested an increase or decrease from the amount in previous years? Yes X No If yes, explain below.
Decreased amount from original year of the grant award.

15. Are these funds discretionary? Yes No X If yes, explain below.

16. Are these administrative funds for a restricted receipt? Yes No X If so, what is the amount of the restricted receipt?

17. What is the Federal lapse date? 6/30/2024

18. Grant description and results (give purpose of grant and describe key program activities and expected results in terms of a major program measure).

The State Department of Aging is to receive the funding to support efforts to increase access to naloxone by implementing a copay assistance pilot program that will serve as the payor of the last resort for the US Food and Drug Administration. These funds shall support supplies and materials needed to support this initiative.

19. For Subgrants only, identify the parent Federal appropriation and the agency from which the subgrant will be made:

	Commonwealth	SAP Fund	Business
<u>Appropriation Title</u>	<u>Fund (Fund Type)</u>	<u>Number</u>	<u>Area</u>
State Opioid Response (SOR) Grant	R19649	74017061	74